Name in Full

Certificate of Death

99

Emma Elizabeth Basford

Died at Town: Solomons — County: Calvert Co MARYLAND

Date 1899 — Month: Oct — Day: 16 | Age: Y. 25 M. 8 D. | Native of: Calvert | Occupation: Housekeeper

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ | Number of children living 2

~~Husband~~ Wife of Thomas S. Basford 22a

Father's Name: William E Weston | Mother's Name: Mary L. Lusby

Cause of Death — Primary: Gastric Catarrh — How long sick: 3 Weeks

Immediate: Phthisis Pulmonalis.

Accident, Suicide, Homicide

Reported by: Eltinge Price MD

Address: Prince Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. E Lacquess

of Bertha . Md.

Seen by Coroner we have none

of

Information contained in this certificate received

from Husband of Deceased

of Johnsons Calvert Co

Name in Full

Certificate of Death

107

Malachi Booze

Town

County

Died at Mt Harmony Calvert. MARYLAND

Month Day Y. M. D.

Date 1899 Oct 7 Age 20. 6.

Native of Calvert Co. Occupation Laborer

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ Divorced

~~Female~~ Colored Single ~~Widower~~ ~~Number of children living~~

Husband of

Wife

Father's Name John W. Booze

Mother's Name not Known.

Cause of Death: Primary Tuberculosis 22a

How long sick 3 years

Immediate Pulmonary Hemorrhage

~~Accident, Suicide, Homicide~~

Reported by T. Mc. Causey M. D.

Address Dunkirk, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78898

Name in Full

Certificate of Death

121

Mrs Mary Buckler

Died at Town Pr Frederick County Calvert MARYLAND

Date 1909 Month Oct Day 25 | Age Y. 85 M. D. | Native of Calvert | Occupation Farmer

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ ~~Single~~ Widow ~~Widower~~ Divorced | Number of children living 6

~~Husband~~ ~~of~~

~~Wife~~

~~Father's~~ Name

Mother's Name

Cause of Death { Primary

Immediate Old age

How long sick 6 months

~~Accident, Suicide, Homicide~~

Reported by W H Hutchins MD

Address Owensville Calvert Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full

Certificate of Death

108

Mattie Elizebeth Burr

Died at Town: Fraziers County: Calvert co MARYLAND

Date 1894 Month: Oct Day: 14 | Age Y.: 10 M.: 4 D.: | Native of: Baltimore | Occupation:

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living

Husband of

Wife

Father's Name: John R. Burr Mother's Name: Mary Ann Smith

Cause of Death: Primary: Convulsions 48 How long sick: 3 weeks

Immediate: insanitin Accident, Suicide, Homicide

Reported by Jas. L. Tucker, Undertaker

Address Bertha, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70898

Attended by Dr. .....

of .....

Seen by Coroner we have none

of .....

Information contained in this certificate received

from .....

of .....

Name In Full

Mary Ellen Coale

Certificate of Death

105

Died at Town Mt Harmony County Calvert MARYLAND

Date 1899 Month Oct Day 29 | Age Y. 30 M. D. | Native of Md | Occupation Housewife

~~Male~~ Female | White Colored | Married ~~Single~~ ~~Widow~~ ~~Widower~~ Divorced | Number of children living 6

~~Husband~~ Wife of James Coale

Father's Name Odd Gantt | Mother's Name Mary Gantt 52

Cause of Death: Primary Cerebral Tumor | How long sick 3 months

Immediate Probably Tuberculas | ~~Accident~~, Suicide, Homicide

Reported by J W Leitch M D

Address Huntingtown Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full

Certificate of Death

Mary A. Duke

Died at Town Prince Frederickstown County Calvert MARYLAND

Date 189 Month Oct. Day 27 | Age Y. 66 M. D. | Native of | Occupation

~~Male~~ Female | White Colored | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | Divorced | Number of children living 5

~~Husband~~ Wife of James Basil Duke

Father's Name | Mother's Name

Cause of Death — Primary — 43 — How long sick

Immediate — Softening of the brain

Accident, Suicide, Homicide

Reported by Calvert Gazette.

Address Oct. 28/99

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full

William D. Gray

Certificate of Death

101

Died at Town: Lusby County: Calvert co MARYLAND

Date 1899 Month: Octo Day: 23 | Age Y. 29 M. D. | Native of Calvert | Occupation Oysterman

Male ~~Female~~ | ~~White~~ Colored | Married ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ Number of children living 4

Husband ~~Wife~~ of Henrietta Johnson

Father's Name Zachariah Gray | Mother's Name Mary E. Batson

Cause of Death: Primary Consumption | How long sick 10 months

Immediate Dropsy 22a | ~~Accident, Suicide, Homicide~~

Reported by Jas L. Gurley Undertaker

Address Berthant [redacted] Calvert co Md or Dr Hughes

Must be signed by physician if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. Elwood Huggins

of Bertha Calvert Co

Seen by Coroner we have none

of

Information contained in this certificate received

from Mother of Deceased

of Lusby, P O.

Name in Full Caroline Haddaway

Certificate of Death 104

Died at Town Solomons County Calvert MARYLAND

Date 189 Month October Day 29 | Age Y. 75 M. 6 D. 19 | Native of Md | Occupation ———

~~Male~~ White ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widow~~ Number of children living 3

~~Husband~~ Wife of John Haddaway

Father's Name John W. Mitchell | Mother's Name Mary Mitchell

Cause of Death: Primary Senile Debility 141 | How long sick 2 1/4 days.

Immediate Intercranial Hemorrhage. | ~~Accident, Suicide, Homicide~~

Reported by Dr W H Marsh

Address Solomons Calvert Co. Md.

Must be signed by physician, if any in attendance, otherwise [illegible]ner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Arthur Cummings Harten

Certificate of Death 94

Died at Solomons Town, Calvert County, MARYLAND

Date 189 9 October 1 | Age 21 Y. 1 M. D. | Native of Md., Oysterman

Male / ~~Female~~ | White / ~~Colored~~ | ~~Married~~ / Single | ~~Widow~~ / ~~Widower~~ | ~~Divorced~~ / ~~Number of children living~~

Husband / Wife of 1

Father's Name George R.R. Harten

Mother's Name Elizabeth Elliott

Cause of Death: Primary Malarial Fever Remittent — How long sick 2 weeks

Immediate Exhaustion — ~~Accident, Suicide, Homicide~~

Reported by Dr W.S. Marsh

Address Solomons, Calvert Co., Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55968

Name in Full: Robert Lee Hooper

Certificate of Death: 97

Died at: Town: Cox — County: Calvert — MARYLAND

Date 189 9: Month: Oct — Day: 9 — Age: Y. 6 M. D. — Native of: Md. — Occupation: ~~Occupation~~

/ Male — ~~Female~~ — White — ~~Colored~~ — ~~Married~~ — ~~Single~~ — ~~Widow~~ — ~~Widower~~ — Divorced — Number of children living: ~~Number of children living~~

~~Husband~~ / ~~Wife~~ of

Father's Name: McDaniel Hooper — Mother's Name: Hattie Bowen

Cause of Death: Primary: Endocarditis — How long sick: 2 days

Immediate: Colic — 82 — Accident, Suicide, Homicide

Reported by: Estelle Paddy, M.D.

Address: Huntington Calvert Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

103

Joshua Humphreys

Died at Town: Lower Marlboro County: Calvert MARYLAND

Date 189 Month: Oct Day: 28 | Age Y. 64 M. D. | Native of Calvert Co Md | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ Widower | Divorced | Number of children living 10

Husband of ~~Wife~~ Annie E Denton

Father's Name James Humphreys | Mother's Name Mary Sprigg

Cause of Death: Primary 161

Immediate Complication of diseases | How long sick | Accident, Suicide, ~~Homicide~~

Reported by Jas L. Tucker Jun. Dr Not here

Address Bristol Calvert Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70898

Attended by Dr. Elwood Hughes

of Berth Calvert Co

Seen by Coroner we have none

of

Information contained in this certificate received

from William E. Humphreys

of Cove Point Calvert Co Md

Name in Full

Certificate of Death

95

Benjamin Jefferson

Died at Town: Lusby. County: Calvert MARYLAND

Date 189 9 | Month: Oct | Day: 3 | Age: Y. 8 M. D. | Native of: Calvert | Occupation: — —

Male ~~Female~~ | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children living

Husband of
Wife

140

Father's Name: Robert Jefferson

Mother's Name: Hester Janney

Cause of Death:
- Primary: Obstruction of air passages
- Immediate: Suffocation - Inanition.

How long sick: 1 Week

Accident, ~~Suicide, Homicide~~

Reported by: Jas L. Tucker Undertaker

Address: Cove Point or Bertha, Calvert Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. The Case was referred was
of taken to Dr Hungerford Bertha P. O,
once 3 times or oftener
Seen by Coroner We have no Coroner
of

Information contained in this certificate received
from Moses Janney
of Lusby. Calvert co Md

Name in Full

George H Jones

Certificate of Death

100

Died at Town Prince Frederick Town County Calvert · MARYLAND

Date 1899 Month Oct Day 16 | Age Y. 64 M. D. | Native of Md | Occupation Physician

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ | Number of children living 3

~~Wife~~ Husband of Laura A ~~Jones~~ Lancaster

Father's Name Washington Jones | Mother's Name Elizabeth Mackin

Cause of Death: Primary Apoplexy 42 | How long sick 8 hours

Immediate | ~~Accident, Suicide, Homicide~~

Reported by Eli J. Dadd M.D.

Address Huntingtown Calvert Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full: Lavinia Lyons

Certificate of Death: 96

Died at: Town: Forest Manor, County: Calvert, MARYLAND

Date 189: Month: Oct, Day: 6 | Age: Y. 38. M. D. | Native of: Calvert | Occupation: Farmer's wife

~~Male~~ Female | White / ~~Colored~~ | Married / ~~Single~~ | ~~Widow~~ / Widower | ~~Divorced~~ | Number of children living: 9

~~Husband~~ Wife of: Jno. T. Lyons

Father's Name: Benjamin Harrison | Mother's Name: Eliza Harrison

Cause of Death — Primary: Pulmonary Tuberculosis | How long sick: 3 yrs

Immediate: Asthenia 22a | ~~Accident, Suicide, Homicide~~

Reported by: J. P. Leitch M. D.

Address: Hunting Town Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

10 z

Eliza Rebecca Phillips

Died at Town Solomons County Calvert Co MARYLAND

Date 189 9 Month Oct Day 24 | Age Y. 5 M. 7 D. | Native of Calvert | Occupation

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number ~~of children~~ living

Husband of
Wife

Father's Name William Phillips Mother's Name Mary F. Boom

Cause of Death: Primary 86

Immediate True Croup

How long sick

~~Accident, Suicide, Homicide~~

Reported by Jas L. Tucker Undertaker

Address Cove Point or Bertha

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. No Physician

of

Seen by Coroner we have none

of

Information contained in this certificate received

from Mary F. Bowie Mother of Deceased

of Solomons Calvert Co. Md

Name in Full

Certificate of Death

98

Rosa A. Walker

Died at Town: Dunkirk County: Calvert MARYLAND

Date 1899 Month: Oct Day: 15 | Age Y. 25 M. — D. — | Native of Calvert Co | Occupation Helper in housework.

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband of

Wife

Father's Name Geo. W. Walker

Mother's Name Sarah Mayhew

Cause of Death: Primary Typhoid Fever | How long sick 24 days.

Immediate Coma | ~~Accident, Suicide, Homicide~~

Reported by Thos. M. Chaney M. D.

Address Dunkirk, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898